

REVOCATION OF POWER OF ATTORNEY WITH NEW POWER OF ATTORNEY AND CHANGE OF CORRESPONDENCE ADDRESS	Application Number	10/826,904-Conf. #2223
	Filing Date	April 16, 2004
	First Named Inventor	Mitchell Shirvan
	Art Unit	1614
	Examiner Name	Not Yet Assigned
	Attorney Docket Number	20342/1205256-US2

I hereby revoke all previous powers of attorney given in the above-identified application.

☐ A Power of Attorney is submitted herewith.

OR

☒ I hereby appoint the practitioners associated with the Customer Number:

☒ Please change the correspondence address for the above-identified application to:

☒ The address associated with
Customer Number:

OR

☐ Firm or Individual Name **DARBY & DARBY P.C.
Joseph R. Robinson**

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I am the:

☐ Applicant/Inventor.

☒ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

Signature 
Name **Joseph R. Robinson**
Date **25 Nov 2007**

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☐ *Total of 1 forms are submitted.